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UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yuzo OHTSURU

Serial No: 09/135,180

Filed: August 17, 1998

For: SOLID-STATE IMAGE PICKUP DEVICE FOR  
PRODUCING THINNED IMAGE

DUPLICATE

Art Unit: 2612

Examiner: Nguyen, Luong T.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents  
Washington D.C. 20231, on

June 12, 2003

Date of Deposit

John P. Scherlach, Reg. No. 23,009

Name

Signature Date 06/12/03

Signature

Date

I hereby certify that this paper and every paper referred to herein is being transmitted via facsimile to recipient at (703) 872-9314 on:

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John P. Scherlach, Reg. No. 23,009

Name

Signature Date 06/12/03

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Date

Mail Stop AF

Commissioner for Patents

P. O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	20	-	20      **	0	LG=\$18 SM=\$9	\$18	\$    0
INDEPENDENT CLAIMS FEE	5	-	5      ***	0	LG=\$84 SM=\$42	\$84	\$    0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140		\$    0
TOTAL							\$    0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ -0- to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.
- ☐ A check in the amount of \$ -0- to cover the extension fee is enclosed. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

By:

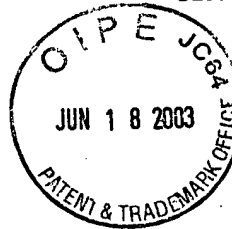
John P. Scherlach  
Registration No. 23,009  
Attorney for Applicant(s)

Date: June 12, 2003

Biltmore Tower  
500 South Grand Avenue, Suite 1900  
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Appl. No. 09/135,180  
Amdt. Dated June 12, 2003  
Reply to Office Action of April 8, 2003

Attorney Docket No. 81784.0179



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Name  
Signature Date 06/12/03

**RESPONSE TO FINAL OFFICE ACTION**

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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Name  
Signature Date 06/12/03

In response to the Final Office Action of April 8, 2003, please amend the above-identified application as follows:

**Amendments** to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.

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JUN 20 2003

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